

JUDICIAL SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT 5159

FORM JSPAC COVER SHEET PG 1

The JSPAC INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT #
(Ethics Commission filers)
00041401

2 Total pages this report:

1/5

3 COMMITTEE NAME

The Friends of Darlene Byrne 2000

OFFICE USE ONLY

Date Received

4 COMMITTEE ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

☐ Change of Address

98 San Jacinto
#2000
Austin TX 78701

Date Hand-delivered or Date Postmarked

5 CAMPAIGN TREASURER NAME

TITLE FIRST MI

Attorney Stephen I

NICKNAME LAST SUFFIX
Adler

Receipt #

Amount

Date Processed

Date Imaged

6 CAMPAIGN TREASURER'S STREET ADDRESS
(Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT/SUITE #; CITY; STATE; ZIP CODE

808 Nueces
Austin TX 78701

7 CAMPAIGN TREASURER'S MAILING ADDRESS

STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

808 Nueces
Austin TX 78701

☐ Change of Address

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION

(512) 478-4995

9 REPORT TYPE

☐ January 15
☒ July 15

☐ 30th day before election
☐ 8th day before election
☐ Runoff

☐ Exceeded \$500 limit
☐ Dissolution (attach PAC-DR)
☐ 10th day after campaign treasurer termination

10 PERIOD COVERED

Month Day Year

01/01/2002

THROUGH

Month Day Year

06/30/2002

11 ELECTION

ELECTION DATE
Month Day Year

ELECTION TYPE

☐ Primary ☐ Runoff ☐ General ☐ Special

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JUDICIAL SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE & TOTALS

FORM JSPAC
COVER SHEET PG 2

12 COMMITTEE
NAME

The Friends of Darlene Byrne 2000

ACCOUNT # (Ethics Commission filers)

00041401

13 COMMITTEE
PURPOSE

(Attach list on plain
paper to complete this
report if necessary)

☐ CANDIDATE

CANDIDATE / OFFICEHOLDER NAME

Darlene Byrne

☐ SUPPORT

☐ OPPOSE

☒ ASSIST
(officeholders only)

☒ OFFICEHOLDER

OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)

126th District Judge

14 CONTRIBUTION
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN
PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 0.00

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 0.00

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$ 95.60

4. TOTAL POLITICAL EXPENDITURES

\$ 1171.23

CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY
OF THE REPORTING PERIOD

\$ 0.00

OUTSTANDING
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

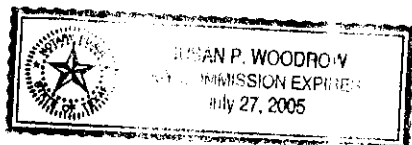
\$ 17638.52

15 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report
is true and correct and includes all information required to be reported by
me under Title 15, Election Code.

Signature of Campaign Treasurer

SUBSCRIBED AND SWORN TO BEFORE ME, the undersigned Notary Public on this the
12 day of July, 2002.



Susan P. Woodrow
Notary Public in and for the State of Texas

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 3/5**2 FILER NAME**

The Friends of Darlene Byrne 2000

3 ACCOUNT # (Ethics Commission filers)

00041401

4 Date**5** Payee name

Vote 2002, Democratic Party

06/05/2002

6 Payee address; City; State; Zip Code

P.O. Box 684263

Austin TX 78768

7 Amount (\$)

250.00

8 Purpose of expenditure (See instructions regarding type of information required.)
Contribution**9** ** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

Payee name

Volunteer Legal Services

05/08/2002

Payee address; City; State; Zip Code

700 Lavaca Street

Suite 602

Austin TX 78701

Amount (\$)

65.00

Purpose of expenditure (See instructions regarding type of information required.)
Contribution** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

Payee name

Volunteer Legal Services

04/17/2002

Payee address; City; State; Zip Code

700 Lavaca Street

Suite 602

Austin TX 78701

Amount (\$)

150.00

Purpose of expenditure (See instructions regarding type of information required.)
Contribution** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

Payee name

Office Max

02/18/2002

Payee address; City; State; Zip Code

907 W. 5th Street

Austin TX 78701

Amount (\$)

99.54

Purpose of expenditure (See instructions regarding type of information required.)
Office supplies** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 4/5**2** FILER NAME

The Friends of Darlene Byrne 2000

3 ACCOUNT # (Ethics Commission filers)

00041401

4 Date**5** Payee name

Merry Maids

02/18/2002

6 Payee address; City; State; Zip Code

1433 W. Ben White Blvd

Austin TX 78704

7 Amount
(\$)

211.09

8 Purpose of expenditure (See instructions regarding type of information required.)
Office cleaning**9** ** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

Payee name

Sam's Club

02/05/2002

Payee address; City; State; Zip Code

9700 N. Capital of Texas Highway

Austin TX 78759

Amount
(\$)

200.00

Purpose of expenditure (See instructions regarding type of information required.)
Office equipment**** Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held

Date

Payee name

Ed Shack

02/05/2002

Payee address; City; State; Zip Code

814 San Jacinto Blvd

Austin TX 78701

Amount
(\$)

100.00

Purpose of expenditure (See instructions regarding type of information required.)
Legal**** Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held

CREDITS (optional)**SCHEDULE K**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule K: 5/5

2 FILER NAME

The Friends of Darlene Byrne 2000

3 ACCOUNT # (Ethics Commission filers)

00041401

4 Date

06/05/2002

5 Payor name

Fritz Byrne & Head

8

Amount
(\$)

77.25

6 Payor address; City; State; Zip Code

98 San Jacinto Blvd

#2000

Austin TX 78701

7 Reason for credit

Reimbursement for copy cost overcharge